

# BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO.	FILING DATE	
						APPLICANT(S)		
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	I						51	
2		I					52	
3		I					53	
4		I					54	
5		I					55	
6		I					56	
7		I					57	
8		I					58	
9		I					59	
10		I					60	
11		I					61	
12		I					62	
13		I					63	
14		I					64	
15		I					65	
16		I					66	
17		I					67	
18		I					68	
19		I					69	
20		I					70	
21		I					71	
22		I					72	
23		I					73	
24		I					74	
25		I					75	
26		I					76	
27		I					77	
28		I					78	
29		I					79	
30		I					80	
31		I					81	
32		I					82	
33		I					83	
34		I					84	
35		I					85	
36		I					86	
37		I					87	
38		I					88	
39		I					89	
40		I					90	
41		I					91	
42		I					92	
43		I					93	
44		I					94	
45		I					95	
46		I					96	
47		I					97	
48							98	
49							99	
50							100	
TOTAL IND.	2						TOTAL IND.	
TOTAL DEP.	45						TOTAL DEP.	
TOTAL CLAIMS	47						TOTAL CLAIMS	

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS